SWORN DECLARATION

In my capacity as applicant, applying for a visa to enter in Argentine Republic, do hereby declare that the declaration given below is true to the best of my knowledge and belief and nothing has been concealed therein.

- -l have provided my travel history in the last 40 days
- -I do not have any symptoms that correspond to the COVID-19.
- -I had NO contact with a person infected with Coronavirus
- -I have been notified that the visa consists of a right to enter in Argentina exceptionally the migration authorities reserve the right to allow or deny entry to the republic of Argentina.
- -At the time of applying for the visa I have been informed about the quarantine measures taken by Argentine republic and that upon arrival in Argentina it will be subject to any modifications that may be provided.
- -I have provided in my visa application the complete details including the names, surnames, contact numbers and the address/ addresses of my friend/my family/Company where I will stay or work with in Argentina.
- En case of travelling in a group/company, I have to mention the complete details of the accompanied person/s in the visa application.

Details of the applicant

SURNAMES AND NAMES:

DATE OF BIRTH:

NATIONALITY:

PASSPORT NUMBER:

CONTACT NUMBER:

EMERGENCY CONTACT NUMBER:

COMPLETE ADDRESS IN INDIA:

SIGNATURE OF THE APPLICANT:

SIGNATURE OF THE OFFICIAL OF THE EMBASSY: